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| Application for Enrolment |
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| **Aitken College**  **1010 Mickleham Road**  **GREENVALE VIC 3059**  **Phone: 03 9333 1866 Fax: 03 9333 4795**  **Email:** [**admin@aitkencollege.edu.au**](mailto:admin@aitkencollege.edu.au)  **Website: www.aitkencollege.edu.au**  **­­­­­­­­­­­­­­­­­­­­­­­­**   |  | | --- | | **OFFICE USE ONLY**  **Student ID: Year Level: Year:**  **Student Surname/Given:**  **Receipt No:** | |

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| **APPLICATION FOR ENROLMENT** | | | | | | | | | | |
| **STUDENT DETAILS** | | | | |  | | | | | |
| **Student’s Surname** | | | | |  | | | | | |
| **Given Name/s** | | | | |  | | | | | |
| **Preferred Name** | | | | |  | | | | | |
| **Gender** | | | | | ❑ Male | | ❑ Female | | | |
| **Date and Place of Birth** | | | | |  | |  | | | |
| **Student Status** | | | | | ❑ Australian Citizen | | ❑ Australian Resident (on a visa) | | | |
| **Nationality** | | | | |  | | | | | |
| **Date Arrived in Australia** | | | | |  | |  | | | |
| **Indigenous/Torres Strait Islander** | | | | | ❑ Yes | | ❑ No | | | |
| **Language/s spoken at home** | | | | | Main | | Other | | | |
| **Religion** | | | | |  | | | | | |
| **Home Address** | | | | | P/Code | | | | | |
| **Is there a Court Order in relation to this**  **Student?** | | | | | ❑ Yes  *If Yes, please supply a copy* | | ❑ No | | | |
| **Victorian Student Number:** *(if known)* | | | | |  | | | | | |
| **Present School**  *(if applicable)* | | | | |  | | | | | |
| **Present Year Level** | | | | |  | | | | | |
| **Year level applying for**: *(eg Year 7, 2015)* | | | | | Year Level: Year of Entry: | | | | | |
| **Name of past / current / future siblings** | | | | |  | | | | | |
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| **SPECIAL STUDENT NEEDS AND CONSIDERATIONS** | | | | | | | | | | |
| **a.** | Does your child have any special achievements, talents? | | | | | | | | ❑ Yes | ❑ No |
| **b.** | Does your child have any learning problems? | | | | | | | | ❑ Yes | ❑ No |
| **c.** | Has your child attended any specialised classes, agencies, special units or centres? | | | | | | | | ❑ Yes | ❑ No |
| **d.** | Does your child have any special needs or considerations?  (*disabilities, impediments, allergies, restrictions on physical activity*) | | | | | | | | ❑ Yes | ❑ No |
| *If Yes to any of the above questions, please give details using attachments if necessary.* | | | | | | | | | | |
| **FAMILY DETAILS** | | |  | | |  | | | | |
|  | | | **Father/Guardian** | | | **Mother/Guardian** | | | | |
| **Title** | | | ❑ Mr ❑ Dr | | | ❑ Mrs ❑ Ms ❑ Miss ❑ Dr | | | | |
| **Family Surname** | | |  | | |  | | | | |
| **Given Name/s** | | |  | | |  | | | | |
| **Usual Occupation** | | |  | | |  | | | | |
| **Employer** | | |  | | |  | | | | |
| **Contact Numbers** | | *Home* |  | | |  | | | | |
|  | | *Work* |  | | |  | | | | |
|  | | *Mobile* |  | | |  | | | | |
|  | | *Email* |  | | |  | | | | |
| **Country of Birth** | | |  | | |  | | | | |
| **Home Language** | | |  | | |  | | | | |
| **Religion** | | |  | | |  | | | | |
| **Home Address** | | |  | | |  | | | | |
| **Postal Address** *(if different)* | | |  | | |  | | | | |
| **Relationship to Child** *(Father, Mother, Foster Parent, Caregiver etc)* | | |  | | |  | | | | |
|  | | |  | | |  | | | | |
| **SEPARATED OR DIVORCED PARENTS** *(Complete this section if separated/divorced)* | | | | | | | | | | |
| The College is required by law to provide both separated/divorced parents with copies of school reports, school information, etc. unless a court order has been made restricting parental contact. Therefore, the above details for both parents must be completed and both parents must sign this Application for Enrolment form. A copy of our separated parent’s guidelines is available on request. | | | | | | | | | | |
| **Parental Restrictions** | | | | **Mother** | | | | **Father** | | |
| **Child lives with** | | | |  | | | |  | | |
| **Access to Child** | | | |  | | | |  | | |
| **Student’s School Report** | | | |  | | | |  | | |
| **School Correspondence** | | | |  | | | |  | | |
| **Contact Details on Student Class List** | | | |  | | | |  | | |

**CONDITIONS OF ENROLMENT**

We have read the “Terms of Enrolment” submitted to us and each agree to abide by these and any regulations from time to time in force at the school and to pay all fees and other monies falling due to the school in respect of the child enrolled.

If our child is transferring from another school, we authorise you to obtain from that school other information as you may require, this may include the manner in which our financial obligations were conducted.

Both parents’ signatures are required unless one parent is sole custodian. Please provide copy of relevant court order to substantiate the above (where a custody order exists).

Father or Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother or Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***To complete this Application, please:***

* Return completed Application for Enrolment form (one per child)
* Attach a copy of the child’s Birth Certificate
* Attach a Registration Fee of $55.00 (GST included) per child by cash/cheque or credit card. Please make cheques payable to Aitken College. **This is non-refundable**.
* Retain your copy of the Terms of Enrolment.

**To: The Registrar**

**Aitken College**

**PO Box 2018**

**GREENVALE VIC 3059**

**NOTE:**

Upon receipt of the Application, you will be notified that your child’s name has been added to the relevant enrolment list. In order to finalise the enrolment process, you will be required to attend an interview prior to enrolment subsequent to which your child may be offered a place. Students may also be required to undertake a basic literacy and numeracy assessment.

Completion of the Application for Enrolment form and payment of the Application Fee does not guarantee a place.

The offer of enrolment is at the discretion of the Principal who will consider each case on its merits in light of enrolment priorities and the availability of a place.

It is the responsibility of the Parent/Guardian to advise the School of any changes of address and telephone number. Failure to do so may result in the applicant not being offered a placement in the School.

**PAYMENT**

Credit Card Payment: ❑ Visa ❑ MasterCard ❑ Amex

Card No:

Expiry Date:

Name on Card: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount to be charged: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Aitken College is bound by the Australian Privacy Principles contained in the Commonwealth Privacy Act. The school has a Privacy Policy in conformity with the legislation and a copy is available from Reception.**